North Monterey County Unified School District

♦ 13990 Castroville Blvd., Castroville, California 95012 ♦ (831) 633-3343

Complaint Form

Date of event leading to complaint: _____

To: _____
Supervising Administrator

From: _____
Name

_____
Address

_____
City, State Zip

Phone Number: ( ) _____

Position/Title of person filing complaint:

_____Parent
_____Student
_____Faculty/Staff
_____Administrator
_____Community Member
_____Other _____

Name of person(s) or program against whom complaint is made:

_____

Reason for complaint:

A. _____ Complaint Against Employee
B. _____ Sexual Harassment
C. _____ Discrimination (Circle One) Ethnic Group Religion Age Gender Disability Sexual Orientation
D. _____ Other (Specify) _____

Specifics of Complaint: (Describe in your own words, the grounds for your complaint including all names, dates, and places necessary for a complete understanding of the complaint.)

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

(Please use additional sheets, if necessary, to describe your complaint fully.)

Direction/Understanding:

Complaints directed to an individual should be discussed with that person prior to the filing of a written complaint.

1. Information regarding a student and/or employee must be kept confidential.
2. No retribution is to be taken as a result of this complaint.
3. All complaints should be filed in a timely manner, i.e., within ten (10) days of when the complainant should have been aware of the issue.

To whom have you spoken to regarding this complaint? (Name of the employee(s) against whom the complaint is made, his/her Principal, Supervisor, or other District Official)

_____

What was the result of the discussion?

_____

_____

_____

_____

Additional comments:

_____

_____

_____

What remedy or solution do you seek?

_____

_____

_____

_____

It is understood that additional information about this complaint may be requested from me (us) and if such information is available, I (we) will present it upon request.

I (we) also understand that if a hearing is held regarding this complaint by the North Monterey County Unified School District, such hearing will be open to all parties involved in this matter, but will not be a public hearing. Further, I (we) understand that the Board of Trustees will be the final arbitrator, unless existent state and/or federal statutes and/or regulations provide for additional Appeal procedures.

I (we) certify under penalty of perjury that the foregoing is true and correct.

Executed this _____day of _____, 20_____, at Castroville, CA.

Signature(s): _____

_____